

*State Planning Project for the Uninsured*  
**The Successor Council Concept Paper**

The State Planning Project for the Uninsured Advisory Council is charged with developing a plan to ensure that all Michigan residents have access to health insurance coverage. The Advisory Council has made progress in coming together, defining the problem, agreeing that providing coverage for all Michigan residents is critical, and in developing recommendations to extend coverage to a significant segment (over 50%) of the uninsured. Additional work is necessary, however, in order to continue to make progress and reach consensus on strategies that will lead to coverage for all Michigan residents.

The Advisory Council supports the establishment of a successor council to continue the efforts begun by the State Planning Project for the Uninsured. The focus of the successor council will be on healthcare coverage (not solely the uninsured) and assuring access to affordable, high quality coverage for all Michigan residents. The successor council will have a governing board that shall serve as a think-tank and propose policies to implement the recommendations of the Advisory Council and to deal with the inextricably intertwined issues of health care costs, quality, access and insurance coverage. The successor council shall provide the on-going effort needed to carry forward the momentum created by the State Planning Project for the Uninsured Advisory Council.

**The primary focus of the successor council will be on healthcare coverage.** Towards this end, it is anticipated that the successor council will further identify and define the issue, propose policy recommendations, build constituency and support for the recommendations, and engage in activities to support the adoption of recommendations by policy makers. It is also anticipated that the recommendations will contribute to an improved business climate and support fair and adequate reimbursement for healthcare providers.

**Guiding Principles for the Successor Council:**

- Partnership – must have people at the table who are willing to work together, consider varying perspectives, and understand the political arena
- Inclusion and Collaboration – will seek to include and collaborate with the various interests and constituents with a stake in this issue
- Responsiveness – will be responsive to the concerns and needs of the people of Michigan.
- Healthcare Cost efficiency – identify opportunities to impact escalating healthcare costs
- Long-Term Thinking & Short-Term Results.
- Action-Oriented and Sustainable
- Policy-focused -- given committed membership and adequate resources, the group could function in an advisory capacity to health policy makers for many years.
- Thoughtful Leadership - representation from a wide variety of stakeholders; disparate groups coming together for a common purpose.

**Creation of the Successor Council and its Governing Board:**

- The successor council and its governing board must be independent, non-partisan, non-profit, self-creating, self-sustaining, and self-governing. As a non-governmental entity, the group will be able to provide continuity during changes in the administration.
- Likely to be established as a 501(c)3 organization.
- Supported with funding from foundations, other sources (task specific project funding?)

- Initial support could come from members while seeking foundation support. A task group would work on securing funding. Initial staffing could come from a consultant group, MDCH staff, members, or combination thereof.
- Governing Body Composition – must consider issues of size and complexity, inclusion and manageability. Perhaps Governing Board of approx. 25 members, with Executive Board of 6 to 10 members.

**Issues to Address:**

- Conduct a healthcare financing study to determine how health care dollars are spent in Michigan, and provide recommendations for change as appropriate.
- Conduct other relevant research studies, develop policy papers, and hold information forums to educate policymakers about relevant health care issues.
- Examine the entire healthcare system and the synergy of the components; uncover opportunities for systematic change where indicated.
- Examine the health care system in other states and countries, as well as relevant health care reform efforts, to identify opportunities to apply lessons learned in Michigan.
- Public education about the current health care crisis, the availability of health care coverage programs and services, the importance of healthy lifestyles, and about being a wise healthcare consumer.
- Develop strategies, including financing, to insure that all Michigan residents have health coverage.

**Possible Inclusion for the Successor Council Board Membership:**

Consideration for membership should be given to the following sectors/groups:

- Businesses (Large and Small), Unions, Physicians and other Health Providers, Health Insurers/Plans, Hospitals, Seniors, Local/Regional Interests, Religious Groups, Universities, Advocacy Groups, Government, Individuals and Consumer Advocates (Insured and Uninsured).
- The SPG task group recommends that the MDCH Director and the Insurance Commissioner serve as Ex-officio members of Board, and that broad and appropriate, geographic representation from across the state be appointed as Ex-officio members.
- The SPG task group recommends that legislators and legislative officials not serve on the initial membership of the Board.

**Membership Term:**

Members could serve for a three-year term, with staggered appointments to provide for continuity of leadership and membership.

The successor council board will provide an objective forum in which stakeholders can sit down on a regular basis to identify issues related to health care coverage, conduct research, and attain consensus around workable solutions. It will take the honest, open and respectful debate of all interested parties to develop a plan for health coverage for all, and build commitment to action and successful implementation. Consensus can only be achieved over time as stakeholders begin to trust each other and their motives, learn more about the very complex health care delivery and payment systems, and build an environment where opposing positions can be clarified and reconciled. This group of thoughtful leadership will ensure that policies that shape our health care system reflect the best thinking and best practices available to address the health care needs of Michigan's residents.